

PTO/SB/08a (07-09)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449/PTO				<b>Complete if Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(Use as many sheets as necessary)</i>				Application Number	10/551,668-Conf. #5514
				Filing Date	September 30, 2005
				First Named Inventor	Kazuo Imose
				Art Unit	3735
				Examiner Name	C. Y. JANG
				Attorney Docket Number	TEI-0135
Sheet	2	of	2		

[illegible]

Examiner Signature	Date Considered
--------------------	-----------------

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.